

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 JUN 16 AM 8:33

DOCUMENT # 403232

1. Corporation Name

Sun Luck Restaurant, Inc.

2. Principal Office Address

1442 W. 49th Street

Suite, Apt. #, etc.

City & State

Hialeah, Florida

Zip

33012

Country

U.S.

3. Mailing Office Address

1442 W. 49th Street

Suite, Apt. #, etc.

City & State

Hialeah, Florida

Zip

33012

Country

U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

6/15/1972

5. FEI Number

59-1417979

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Jose Miranda

Street Address (P.O. Box Number is Not Acceptable)

1442 W. 49 Street

Suite, Apt. #, Etc.

100056264771

05/16/05-01055-002 **430.00

City

Miami

State

FL

Zip Code

33012

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 5/9/2005

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Jose Miranda	1442 W. 49 Street	Hialeah, FL 33012
		1442 W. 49 Street	Hialeah, FL 33012
		1442 W. 49 Street	Hialeah, FL 33012
		1442 W. 49 Street	Hialeah, FL 33012

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/2005 305-822-0062

Date

Daytime Phone #

20f2

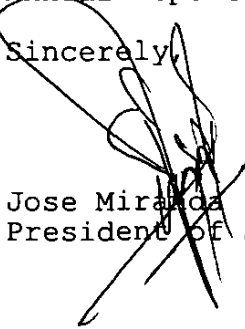
May 16, 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Sun Luck Restaurant, Inc. did not receive prior notice of its need to file an Annual Report. Accordingly the \$600 reinstatement has not been included. Enclosed is \$450 for the Annual Report fees for the years of 2003, 2004 and 2005.

Sincerely,



Jose Miranda
President of Sun Luck Restaurant, Inc.